

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney Docket No  
J6634(C)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## METHOD FOR ARTWORK AND DIGITAL INFORMATION MANAGEMENT

the specification of which (check only one item below):

- is attached hereto.
- was filed as United States application Serial No. \_\_\_\_\_ on \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable)
- was filed as PCT international application \_\_\_\_\_ on \_\_\_\_\_ and was amended under PCT Article 19 on \_\_\_\_\_ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

## PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119
US			
CA			

I hereby claim the benefit under Title 35, United States Code §119(e) of any of any United States provisional application(s) listed below:

## PRIORITY CLAIMS UNDER 35 U.S.C. 119(e):

APPLICATION NUMBER	DATE OF FILING (day, month, year)
60/229,464	01 SEPTEMBER 2000

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

## PRIORITY CLAIMS UNDER 35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (CHECK ONE)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED

## PCT APPLICATIONS DESIGNATING THE U.S.

PCT APPLICATION NO.	PCT FILING DATE	U.S SERIAL NUMBERS ASSIGNED (if any)		

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney Docket No.  
J6634(C)

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

CUSTOMER NUMBER: 000201

Direct all correspondence to : CUSTOMER NUMBER 000201

201

FULL NAME OF INVENTOR  	FAMILY NAME VITALE	FIRST GIVEN NAME MARIAN	SECOND GIVEN NAME ---
RESIDENCE AND CITIZENSHIP  	CITY OLD GREENWICH	STATE OR FOREIGN COUNTRY CONNECTICUT	COUNTRY OF CITIZENSHIP USA
POST OFFICE ADDRESS  	POST OFFICE ADDRESS 5 WENDLE PLACE	CITY OLD GREENWICH	STATE & ZIP CODE/COUNTRY CT 06870

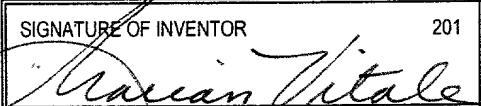
202

FULL NAME OF INVENTOR  	FAMILY NAME PLEBAN-BONIS	FIRST GIVEN NAME JANICE	SECOND GIVEN NAME ---
RESIDENCE & CITIZENSHIP  	CITY TRUMBULL	STATE OR FOREIGN COUNTRY CONNECTICUT	COUNTRY OF CITIZENSHIP USA
POST OFFICE ADDRESS  	POST OFFICE ADDRESS 30 GIBSON AVENUE	CITY TRUMBULL	STATE & ZIP CODE/COUNTRY CT 06611

203

FULL NAME OF INVENTOR  	FAMILY NAME BERTOLINI	FIRST GIVEN NAME PETER	SECOND GIVEN NAME ---
RESIDENCE & CITIZENSHIP  	CITY SHELTON	STATE OR FOREIGN COUNTRY CONNECTICUT	COUNTRY OF CITIZENSHIP USA
POST OFFICE ADDRESS  	POST OFFICE ADDRESS 51 COUNTRY RIDGE DRIVE	CITY SHELTON	STATE & ZIP CODE/COUNTRY CT 06484

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR  	201	SIGNATURE OF INVENTOR  	202	SIGNATURE OF INVENTOR  	203
DATE 5/16/01		DATE		DATE May 16, 2001.	

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney Docket No.  
J6634(C)

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

CUSTOMER NUMBER: 000201

Direct all correspondence to : CUSTOMER NUMBER 000201

204

FULL NAME OF INVENTOR <b>GIZZO</b>	FAMILY NAME <b>GIZZO</b>	FIRST GIVEN NAME <b>DANIEL</b>	SECOND GIVEN NAME <b>P.</b>
RESIDENCE AND CITIZENSHIP <b>NEW FAIRFIELD</b>	CITY <b>NEW FAIRFIELD</b>	STATE OR FOREIGN COUNTRY <b>CONNECTICUT</b>	COUNTRY OF CITIZENSHIP <b>USA</b>
POST OFFICE ADDRESS <b>9 TIMBER SPRINGS ROAD</b>	POST OFFICE ADDRESS <b>9 TIMBER SPRINGS ROAD</b>	CITY <b>NEW FAIRFIELD</b>	STATE & ZIP CODE/COUNTRY <b>CT 06812</b>

205

FULL NAME OF INVENTOR <b>GIZZO</b>	FAMILY NAME <b>GIZZO</b>	FIRST GIVEN NAME <b>DANIEL</b>	SECOND GIVEN NAME <b>P.</b>
RESIDENCE & CITIZENSHIP <b>NEW FAIRFIELD</b>	CITY <b>NEW FAIRFIELD</b>	STATE OR FOREIGN COUNTRY <b>CONNECTICUT</b>	COUNTRY OF CITIZENSHIP <b>USA</b>
POST OFFICE ADDRESS <b>9 TIMBER SPRINGS ROAD</b>	POST OFFICE ADDRESS <b>9 TIMBER SPRINGS ROAD</b>	CITY <b>NEW FAIRFIELD</b>	STATE & ZIP CODE/COUNTRY <b>CT 06812</b>

206

FULL NAME OF INVENTOR <b>GIZZO</b>	FAMILY NAME <b>GIZZO</b>	FIRST GIVEN NAME <b>DANIEL</b>	SECOND GIVEN NAME <b>P.</b>
RESIDENCE & CITIZENSHIP <b>NEW FAIRFIELD</b>	CITY <b>NEW FAIRFIELD</b>	STATE OR FOREIGN COUNTRY <b>CONNECTICUT</b>	COUNTRY OF CITIZENSHIP <b>USA</b>
POST OFFICE ADDRESS <b>9 TIMBER SPRINGS ROAD</b>	POST OFFICE ADDRESS <b>9 TIMBER SPRINGS ROAD</b>	CITY <b>NEW FAIRFIELD</b>	STATE & ZIP CODE/COUNTRY <b>CT 06812</b>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR  <i>Daniel P Gizzo 5/23/01</i>	204	SIGNATURE OF INVENTOR  <i>Daniel P Gizzo 5/23/01</i>	205	SIGNATURE OF INVENTOR  <i>Daniel P Gizzo 5/23/01</i>	206
DATE <i>5/23/01</i>	DATE <i>5/23/01</i>	DATE <i>5/23/01</i>	DATE <i>5/23/01</i>	DATE <i>5/23/01</i>	DATE <i>5/23/01</i>

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney Docket No.  
J6634(C)

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

CUSTOMER NUMBER: 000201

Direct all correspondence to : CUSTOMER NUMBER 000201

201

FULL NAME OF INVENTOR 	FAMILY NAME VITALE	FIRST GIVEN NAME MARIAN	SECOND GIVEN NAME ---
RESIDENCE AND CITIZENSHIP 	CITY OLD GREENWICH	STATE OR FOREIGN COUNTRY CONNECTICUT	COUNTRY OF CITIZENSHIP USA
POST OFFICE ADDRESS 	POST OFFICE ADDRESS 5 WENDLE PLACE	CITY OLD GREENWICH	STATE & ZIP CODE/COUNTRY CT 06870

202

FULL NAME OF INVENTOR 	FAMILY NAME PLEBAN-BONIS	FIRST GIVEN NAME JANICE	SECOND GIVEN NAME ---
RESIDENCE & CITIZENSHIP 	CITY TRUMBULL	STATE OR FOREIGN COUNTRY CONNECTICUT	COUNTRY OF CITIZENSHIP USA
POST OFFICE ADDRESS 	POST OFFICE ADDRESS 30 GIBSON AVENUE	CITY TRUMBULL	STATE & ZIP CODE/COUNTRY CT 06611

203

FULL NAME OF INVENTOR 	FAMILY NAME BERTOLINI	FIRST GIVEN NAME PETER	SECOND GIVEN NAME ---
RESIDENCE & CITIZENSHIP 	CITY SHELTON	STATE OR FOREIGN COUNTRY CONNECTICUT	COUNTRY OF CITIZENSHIP USA
POST OFFICE ADDRESS 	POST OFFICE ADDRESS 51 COUNTRY RIDGE DRIVE	CITY SHELTON	STATE & ZIP CODE/COUNTRY CT 06484

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 	201	SIGNATURE OF INVENTOR 	202	SIGNATURE OF INVENTOR 	203
DATE 5/25/01		DATE 5/25/01		DATE	